Chapter 16: Follow-up

The term follow-up refers to the process whereby a registry continues to monitor the status of a patient's health at periodic intervals. Data fields concerning patient vital status, date of last contact, treatment, and recurrence are updated to maintain accurate surveillance information.

Follow-up data are obtained through active and passive methods. Active follow-up refers to the process of identifying patients whose follow-up information is out of date and contacting someone who can provide more recent information. This may involve contacting the patient, a physician, family member, or other informant. SEER*DMS provides mechanisms for facilitating active follow-up as discussed in the *Active Follow-up* section of this chapter.

Active follow-up procedures can be very time and cost-intensive. Effective passive follow-up processes can significantly reduce the time and effort required to obtain current follow-up information for patients. Passive follow-up refers to the process of updating follow-up information during the linkage of data, including patient data submitted by reporting facilities as well as non-medical data provided by other organizations. Non-medical data are imported as supplemental records and include department of motor vehicle, CMS/HCFA, voter registration, and other data available to the registry. The types of supplemental data that are linked will vary by registry.

Passive follow-up processes are embedded directly into the SEER*DMS workflow as described in the Overview of Passive Follow-up section of this chapter.

In this chapter, you'll learn about

- Passive Follow-up:
    - Overview of Passive Follow-up
    - Overview of the Consolidate FUP Task
    - Opening a Consolidate FUP Task
    - Resolving Discrepancies in Follow-up Data
    - Saving & Exiting the Consolidate FUP Task
- Active Follow-up
    - Overview of Active Follow-up
    - Identifying Patients for Active Follow-up
    - Searching or Filtering the AFUP List
    - Data Shown in the AFUP Manager
    - Assign Patients to a Communication Group
    - Active Follow-up Reports
    - Update Follow-up Data
    - Update Follow-up Data for a Batch of Patient Sets
    - Modifying AFUP Status for a Batch of Patient Sets

Overview of Passive Follow-up

Passive follow-up processes are embedded directly into the SEER*DMS workflow. Automated tasks update follow-up fields when a record is a definite match to a patient set based on deterministic algorithms. These tasks are described below.

- **Rapid Follow-up Task.** To reduce delays in obtaining follow-up data from records that require manual consolidation, the Rapid Follow-up task incorporates follow-up data prior to the full consolidation of the records. This only occurs for records which are processed in the main branch of the workflow and are a definite match to the patient set. The fields that are

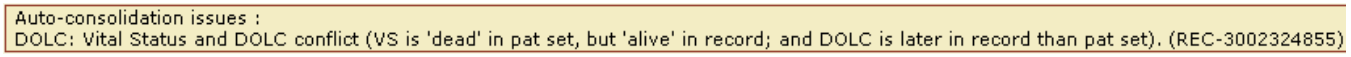
changed and the record's ID are documented in the patient set's audit log. The record continues to the weighted auto-match task followed by a manual match task. It is ultimately linked to the patient set in a consolidate task.

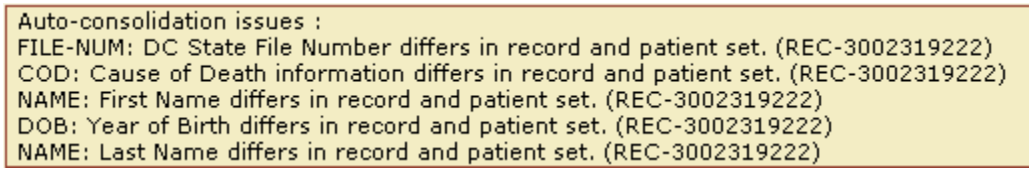
- **Auto-consolidation of Non-medical Records.** Automated tasks in the follow-up branch of the workflow link the records when the patient set fields are updated. The records are matched to patient set data in the Match FUP task or in a pre-load matching task (the matching task that is used is determined by record type and registry rules). The record is processed based on the outcome of the match.
    - If the record is a match to two or more patient sets, the matching determination will be made manually in a Supplemental Match worklist task. The record will then follow the same path as described for the situations below.
    - If the record is a match to a single patient set, data fields in the patient set are updated based on registry-defined algorithms. The fields would include but would not be limited to date of last contact, vital status, and follow-up source (refer to your registry's auto-consolidation rules for more information). An entry is made in the patient set's audit log documenting that the record was linked and any modifications made to data fields. If automatic updates cannot be completed due to a discrepancy between the record and patient set data, a registrar will be able to review the data and resolve the discrepancy in a manual Consolidate FUP task.
    - If no match was found in the Match FUP task, the record is retained in the database and may be used for passive follow-up later. If no match was found by the pre-load matching task, the record is not loaded and no further processing is performed.

Overview of the Consolidate FUP Task

In most registry configurations, records that follow the passive follow-up route through the workflow include Supplemental, Death Notice, Health Index, non-reportable Death Certificate, and Follow-up Only records. In this branch of the workflow, a Consolidate Follow-Up (FUP) task is created when a record cannot be auto-consolidated into a matching patient set. This occurs when data on the incoming record conflict with data in the matching patient set. For example, a Consolidate FUP task will be created if a supplemental record indicates that a patient was alive on a given date, but the patient set data indicate that the patient had died prior to that date. Refer to the *Overview of Passive Follow-up* section of this chapter for a more complete description of the tasks leading to a Consolidate FUP task.

In the Consolidate FUP task, a failure code and message are displayed at the top of the patient set editor indicating the auto-consolidation issues that require attention. The failure code is shown before the colon (DOLC in the example below). The message lists the conflicts in the incoming record and patient set data fields, as shown in the examples below.





The list of failure messages varies by registry to accommodate registry-specific fields and registry-defined auto-consolidation rules. A complete list of the failure codes and messages are provided in the *Auto-Consolidation* section of the *SEER*DMS Technical Reference: Registry-specific Information*.

To complete a Consolidate FUP task, you must perform the following steps:

1. **Confirm that the data are for the same person.** Data should not be consolidated until it is determined that the data to be combined are for the same person. Use the Demo Info tool to confirm the match, as described in the *Resolving Discrepancies in Follow-up Data* section of this chapter.

2. **Resolve discrepancies between the patient set and record data.** The Show Differences feature allows you to review discrepancies between the record and the patient set. If the incoming record contains more current or complete information, Show Differences enables you to update the patient set by copying the data from the record. See the *Resolving Discrepancies in Follow-up Data* section of this chapter for instructions.

3. **Review and Resolve Edit Errors**. SEER*DMS gives you the option of resolving some or all edit errors during the consolidation task, or saving the consolidated patient set and allowing the errors to be resolved in a Resolve Patient Set Errors task.

4. **Save the Patient Set and Exit the Consolidate FUP Task.** Once you have resolved the conflicts between the follow-up data and the patient set, you may save the patient set and allow it to move forward to the next task in the workflow.

The Consolidate FUP task is performed in the patient set editor, and the navigation tools used to complete the task are the same as those used in a Consolidate task. For additional information about these features see *Chapter 11: The Patient Set Editor* and *Chapter 12: Consolidating Data*.

Opening a Consolidate FUP Task

Requires system permission: *consolidate_fup* and (*pat_edit_demographics* or *pat_edit*)

To open a Consolidate FUP task in the worklist:

1. Click a **Consolidate FUP** link in the worklist summary on the home page. To resume a task assigned to you, click the link listed in **My Tasks**. To open an unassigned task, click the link listed in the **Unassigned Tasks**.

2. To search for a task in your tasks and unassigned tasks:

   a. Enter your user name in the **User(s)** filter.

   b. Check the **Show Unassigned** box.

3. To search for a specific task, enter search criteria in the Worklist filters. Common filters to use when searching for a Consolidate FUP task include:

   a. **Task ID(s)** – The complete task ID must be entered.

   b. Filters for data items in the record that triggered the Consolidate FUP task:

      i. **Pat/Rec ID(s)** – Enter the record's ID (REC-NNNNN format).

      ii. **Facility** – Enter an ID or use the lookup to select a facility.

      iii. **Information** – Enter full or partial search text related to fields in the Information column. In Consolidate FUP tasks, this column displays: the record type of the incoming record, the patient's name, and the failure code or codes. The failure codes indicate which fields in the record conflict with the patient set.

4. If you made changes to the filter settings, click **Apply**. Click a task **ID** to open a Consolidate FUP task.

Resolving Discrepancies in Follow-up Data

Requires system permissions: *consolidate_fup* and (*pat_edit_demographics* or *pat_edit*)

1. The incoming record is auto-linked at the patient level. The Demographic Information will be displayed when you open the Consolidate FUP task. Verify that the incoming record contains data for the same patient.

   a. Data from the Incoming Record are displayed in the top section. A field will be highlighted in red if its value differs from the values in the Patient Set fields. Medical Record Number will be highlighted in red if its value differs from Medical Record Number from other records for the same facility.

   b. Consolidated patient set data fields are displayed in bold in the first row of the Patient Set section. These are followed by values from the records that are linked to the patient set.

   c. Review all discrepancies in the data fields and confirm that the incoming record matches the patient set.

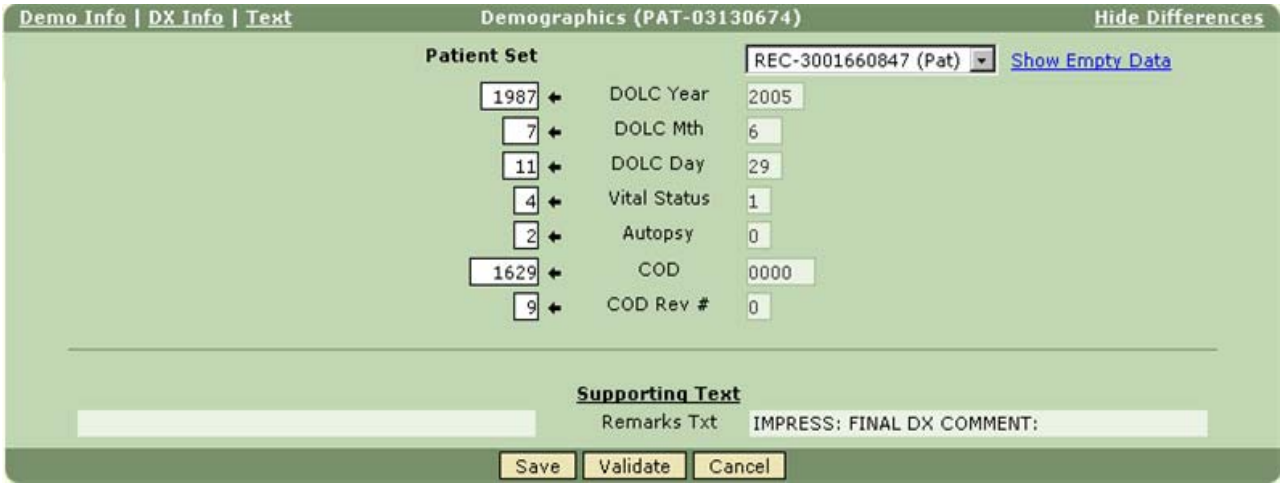
      i. If the incoming record is for the same patient, click **Accept** and continue with step 2 to consolidate the data.

      ii. If the record does not pertain to the same patient, click Reject. The Consolidate FUP task will be canceled. The incoming record will be retained in the database as an unlinked record; it can be rematched at a later time. The patient set will be unchanged.

2. If the record contains data for the same person as the patient set, use the Show Differences tool to resolve discrepancies between the record and patient set. If you are not on the Demographics page of the Patient Set, click the **Demographics** link in the Patient Set section of the navigation box.

   a. Click the **Show Differences** link in the title bar of the Demographics data page. (This link changes to Hide Differences when clicked, allowing you to toggle back and forth.)

   b. Show Differences displays values from the patient set on the left and values from the record on the right. If you determine that data provided on the incoming record is more complete or more accurate, click the arrow ← to overwrite the patient set field with the new data. You may also copy or type values directly into patient set fields.



c. If you do not have sufficient information to determine which set of data is correct, you should submit a request for more information. See *Chapter 22: Follow-back* for instructions to add a follow-back need for this task.

d. Click **Hide Differences** to return to the data page.

3. Review and resolve edit errors, as dictated by registry policy. SEER*DMS gives you the option of resolving edit errors during the consolidation task, or saving the consolidated patient set and allowing the errors to be resolved in a Resolve Patient Set Errors task.

4. When you are ready to save your changes, follow the instructions in the *Saving and Exiting the Consolidate FUP Task* section of this chapter.

Saving & Exiting the Consolidate FUP Task

When saving your changes and exiting the task, you should enter any relevant comments regarding changes made during the task. The comment box at the top can be used to add general comments pertaining to the task. Comment fields next to the revised data elements can be used to add specificity. The general and data field comments will be stored and displayed in the patient set's audit log.

To save your changes and exit the Consolidate FUP Task:

1. Click **Save**.

2. Enter comments to document your changes.

3. Click **Save & Exit**. If there are edit errors in the patient set, it will be forwarded to a Resolve Patient Set Errors task. If there are no errors, the patient set will complete the workflow and will be accessible via the Patient Lookup, but not the worklist.

Overview of Active Follow-up

The following summarizes the steps involved in using SEER*DMS to manage the registry's active follow-up processes. These steps are explained in greater detail is subsequent sections of this chapter.

1. **Execute the system task to identify patients for active follow-up.** This task uses registry-specific algorithms to determine which patients require active follow-up. These criteria are based on vital status, date of last contact, and whether the patient's follow-up status is monitored by the registry. If a patient set meets the task's criteria, the patient set's AFUP status will be set to open and the patient set will be added to the list of patients requiring follow-up on the SEER*DMS AFUP Manager page.

2. **Review the list of patients on the AFUP Manager page. Close the AFUP for selected patients, as appropriate.** In some registries, the system task's criteria include patients who are not routinely followed by the registry. For example, it may be registry policy that patients who only have non-reportable cancers are not followed on a regular basis. These may be flagged as requiring active follow-up because there are times when they are actively followed. If this is not one of those times, use the filters in the AFUP Manager to select those patients and close their AFUPs.

3. **Group Patient Sets based on the method of communication that will be used to obtain follow-up information.** In this step, you will assign a Communication ID to each group of patients who fall into the same communication category. The communication category determines the type of letter, form, or listing that will be used to obtain follow-up information. As an example, you may assign a specific Communication ID to patients who

will be followed via physician letters; or you may assign a Communication ID to patients who will be followed via a particular site-specific form. The Communication IDs will be used by external reports that generate the letters and forms; these are implemented via external reports to give the registry complete control over the number, type, and content of the follow-up reports.

4. **Generate reports, letters, and listings based on the communication IDs assigned in step 3.** Typically, the external reports will be designed to accept a Communication ID as a parameter. Execute each external report using the appropriate Communication ID.

5. **Wait for a response to letters sent to physicians, facilities, patients, and informants.** As you wait, be aware that a patient's follow-up status may be closed if data received at the registry updates follow-up fields. A patient's AFUP status will automatically be set to closed if the patient's vital status is changed from alive to dead; or the date of last contact is set to a date that is more recent than the AFUP DOLC Cutoff used in step 1.

6. **Indicate whether a response was received and enter all data received.** Update the patient data based on information received and indicate that the communication was successful. In order to refine the registry's communication strategies, you should also track unsuccessful and inappropriate communication methods.

Identifying Patients for Active Follow-up

Requires system permission: *system_administration*

The "Identify Patients for AFUP" system task uses registry-specific algorithms to determine whether a patient requires active follow-up. These criteria are typically based on vital status, date of last contact, and whether the patient's follow-up status is monitored by the registry (e.g., non-reportable cases may not be followed by some registries).

If a patient set meets the task's criteria, the patient set's AFUP status will be set to open and the patient set will be added to the list of patients requiring follow-up on the SEER*DMS AFUP Manager page. You may use the AFUP Manager to facilitate and track communications to the patients, their physicians or other contacts. The AFUP Manager also enables you to enter follow-up data as it is received (see the *Using the AFUP Manager* section of this chapter). An AFUP is closed when the patient's vital status and date of last contact indicate that the need has been fulfilled. This may occur when data are changed via data processed in passive follow-up processes or data received as a result of active follow-up procedures.

To designate Patient Sets for active follow-up:

1. Select **System > Tasks**.

2. Click the **Identify Patients for AFUP** link.

3. Enter a date in **DOLC Cutoff** that defines whether a patient set requires active follow-up. A patient set will be considered if the patient set's value for vital status is alive and the date of last contact is prior to this date.

4. Click **Recalculate** to view the number of patient sets that meet the criteria. If the number of patients sets is unacceptably high based on registry policy, adjust the DOLC Cutoff and recalculate.

5. You may enter text related to this task in the **Comment** field. The comment from the last execution of the task is stored in the database (utility_history table).

6. Click **Start**. SEER*DMS will create an AFUP Need for each patient set which matches the registry's active follow-up criteria. Once the task completes, the follow-up staff may use the AFUP Manager to initiate follow-up procedures for these patients.

Searching or Filtering the AFUP List

Requires system permission: *afup_manager*

A Patient Set is listed in the AFUP Manager if its AFUP Status was set to *Open* during the execution of the Identify Patients for AFUP system task. Please verify that the system task was executed with the appropriate options prior to using the AFUP Manager.

To search or review Patient Sets flagged for active follow-up:

1. Select **Manage > Active Follow-up**.

2. No Patient Sets are shown when you first open the AFUP Manager. To use the default filter settings and view all Patient Sets currently flagged as requiring follow-up, click **Apply**.

3. To search for AFUPs by Patient Set or AFUP ID, enter the IDs into the **Patient ID(s)** filter. The PAT- or AFUP- prefixes may be entered, but are not required. To expand the filter so that more than one ID can be entered, click the adjacent to the ID filter. You may type or paste as many IDs as you wish. Separate one ID from the other by entering a space or by pressing **Enter**. (Note: The AFUP ID consists of the numeric portion of the Patient Set ID appended to the AFUP- prefix. This ID is for display purposes only. It is used in the AFUP Manager to make it clear that clicking the ID opens the AFUP page and not the Patient Set itself.)

4. To search for AFUPs related to a particular communication, enter the Communication ID into the **Comm ID(s)** filter. To expand the filter so that more than one ID can be entered, click the adjacent to the ID filter. You may type or paste as many IDs as you wish. Separate one ID from the other by entering a space or by pressing **Enter**.

5. To select a set of AFUPs based on the DOLC Cutoff Date used by the system task to identify patients for active follow-up, select a value in the **Cutoff Dt** filter.

6. If you wish to view a list of AFUPs that have yet to be sent, check the **Exclude Sent** box. Use this control to view AFUPs that were never assigned to a communication group.

7. The date of last contact (DOLC) filter allows you to search on DOLC month, day, and year separately. For example, if you wish to limit the list to patients with December as their month of last contact enter 12 in the first box. To search for patients with a certain year of last contact, enter the value in the third box. To search for patients with the same full date of last contact, enter values in all three boxes.

8. Use the **Age at DX** filter to search for Patient Sets by age of diagnosis. You may specify a range of values (e.g., *0-20* for patients 20 and younger). If a Patient Set has multiple CTCs, the age at diagnosis for each CTC is considered.

9. Use the **Year of DX** filter to search for Patient Sets by year of diagnosis. You may specify a range of years (e.g., *2002-2004*) or use a comma to select separate years (e.g., *2002, 2004*). If a Patient Set has multiple CTCs, the year of diagnosis for each CTC is considered.

10. To limit the list to Patient Sets with a particular value for **Do Not Contact**, use the lookup to select the appropriate value.

11. To search by facility admissions, use the lookup or enter an ID for Admitting Facility. The list will be limited to Patient Sets with an admission to the facility.

12. To search for patients by the facility specified as their last follow-up hospital or to search for patients with an unknown follow-up hospital, use the lookup or enter an ID in the **Last FU Hosp** filter.

13. To search for patients by the physician specified as their last follow-up physician or to search for patients with an unknown last follow-up physician, use the lookup or enter an ID in the **Last FU Phys** filter.

14. To limit the list to Patient Sets with at least one CTC that is reportable to SEER or local agencies, select the appropriate value in the **Reportable** filter. Site

15. Use the **Site** filter to search for Patient Sets by cancer site. You may use the Lookup icon to select a single code from a list, type one or more codes into the box (separate the codes by commas or spaces), or enter a range of values. You may also enter a partial string. For example, enter C50 to search for site codes of C500 through C509. If a Patient Set has multiple CTCs, the site of each CTC is considered.

16. Use the **Histology** filter to search for Patient Sets with at least one CTC that has a particular value for histology. You may specify a range of values (e.g., *800-8999*) or use a comma to select separate years (e.g., *8000, 8500*). If a Patient Set has multiple CTCs, it will be included if at least one of those CTCs meets the criteria for histology.

17. To search by behavior, use the Lookup or enter a value in the **Behavior** filter. You may also enter a range of values. If a Patient Set has multiple CTCs, it will be included if at least one of those CTCs meets the criteria for behavior.

18. If the filters are set appropriately, click **Apply**. Click **Reset** to restore default settings and clear all filters.

Data Shown in the AFUP Manager

The following data columns are shown in the AFUP Manager:

- **AFUP ID** – The AFUP ID consists of the numeric portion of the Patient Set ID shown with an AFUP- prefix. This ID is used in this column of the AFUP Manager to make it clear that clicking the ID opens the AFUP page (clicking an ID shown in the PAT-NNNNNN format will open the Patient Set editor).
- **Last Name** – The patient's last name.
- **First Name** – The patient's first name.
- **DOLC** – The current value of date of last contact stored in the Patient Set.
- **FU Hosp** – The facility defined as the Last Follow-up Hospital in the Patient Set.
- **FU Phys** – The person defined as the Last Follow-up Physician in the Patient Set.
- **Cutoff DT** – The DOLC Cutoff date specified for the Identify Patients for AFUP system task that determined that this Patient Set requires active follow-up. If a Patient Set met the AFUP criteria in multiple executions of the task, the most recent value is shown.
- **Created DT** – The date that the Identify Patients for AFUP system task was executed and determined that this Patient Set requires active follow-up. If a Patient Set met the AFUP criteria in multiple executions of the task, the most recent value is shown.

- **Latest Com** – The most recent communication group to which this Patient Set was assigned. Click the Communication ID to view or enter data received in response to the communication.

Assign Patient Sets to a Communication Group

Requires system permission: *afup_manager*

To assign a Communication ID to a set of Patient Sets:

1. Select **Manage > Active Follow-up**.
2. No Patient Sets are shown when you first open the AFUP Manager. To use the default filter settings and view all Patient Sets currently flagged as requiring follow-up, click **Apply**.
3. Enter search criteria in the filters to select the Patient Sets that will be assigned to a single Communication Group. Select Patient Sets that will use the same report to generate the appropriate mailing, forms, or listing. Instructions for using the filters are provided in the *Searching or Filtering the AFUP Manager* section of this chapter.
4. Select the Patient Sets:
   a. To select all Patient Sets on all pages of the filtered AFUP Manager, click **Send All**.
   b. To select a single Patient Set, check the box to the left of the AFUP ID. Click **Send**.
   c. To select two or more Patient Sets, use one of the following methods:
      i. To select specific Patient Sets, check the box to the left of each AFUP ID. You can only select Patient Sets on the same page with this method.
      ii. To select all Patient Sets displayed on the current page, check the box on the top left of the page, adjacent to the **AFUP ID** column heading. If you would like to exclude a Patient Set, click the checkbox to de-select it.
      iii. Click **Send**.
5. Provide the information that your external report requires to generate the mailing, forms, or listing to obtain follow-up data for the selected patients.
   a. Use the **Communication Type** field to set the *RECIPIENT_TYPE* field in the communication table. Consult the documentation for your report to determine which value should be used. For example:
      i. If the report generates a mailing addressed to a single facility or physician, set **Communication Type** to *Facility/Physician*. Enter a value for physician, facility, or both.
      ii. If the report uses physician or facility information stored in the Patient Sets but requires a default value for either field, set **Communication Type** to *Facility/Physician*. Enter a value for physician, facility, or both. The report would use this information if the field(s) were missing for a patient.
      iii. If the report generates a mailing addressed to the patients or only uses data within each Patient Set, select *Patient Communication*.
   b. Enter a unique **Report ID** that identifies the external report for this communication. (The current version of SEER*DMS does not support internal AFUP reports.)
6. Click **OK**.

7. SEER*DMS will create a new communication entry. The new Communication ID will be displayed at the top of the screen and an AFUP Report Request will be sent to you via email. Use the information in the email to generate the external report or forward the report request to the appropriate person at your registry.

Active Follow-up Reports

Registry staff must create external reports that generate mailings, forms, and listings related to the registry's active follow-up procedures. Each report should accept a Communication ID as a parameter. The Communication ID defines the cohort of patients for the report and provides other information such as recipient type, facility (if applicable), and physician (if applicable). Samples of SQL and detailed descriptions of the database tables and fields relevant to AFUP reports are provided on the SEER*DMS portal. The samples include queries that select demographic patient set fields as well as queries that select CTC-level data fields.

Update Follow-up Data

Requires system permission: *pat_edit* or *pat_edit_demographics* or *afup_manager*

A patient's AFUP status will automatically be set to *closed* if the patient's vital status is changed from alive to dead; or the date of last contact is set to a date that is more recent than the AFUP DOLC Cutoff. The AFUP status will be modified whether the patient's data were updated via ad hoc editing, during a manual worklist task, in an automated passive follow-up task, or via tools specifically designed for active follow-up. Instructions for modifying data field via ad hoc editing and worklist tasks are provided in other chapters of this manual. The following describes methods for updating follow-up data using AFUP features. These tools provide a convenient method to update the fields and track the effectiveness of registry active follow-up procedures.

To update patient follow-up data:

1. If you are entering information for a number of patients and the information was received in response to a particular Communication, please refer to the *Updating Follow-up Information for a Batch of Patient Sets* section of this chapter. In batch mode, you will be able to update date of last contact and vital status for a number of patients. If you need to modify other fields or are entering information that is unrelated to a communication, continue with step 2.

2. You may access the Active Follow-up page for a patient set via the Patient Set Editor or the AFUP Manager:

   a. To access the Active Follow-up page of a Patient Set via the Patient Set editor:

      i. Open the patient set by entering the Patient Set ID in the Lookup box on the SEER*DMS toolbar (or you may use any of the search features described in *Chapter 20: Searching for Records and Patients*).

      ii. Click the **AFUP** link in the Patient Set's navigation box on the left side of the screen. The status of the most recent AFUP is listed at the top. A history of the communications used to obtain follow-up information is displayed in the Communication History section of the page.

      iii. If the Patient Set's AFUP status is open and you wish to view or modify AFUP information, click **Edit**.

   b. To access the Active Follow-up page via the AFUP Manager:

i. Use the filters to find the Patient Set (see *Searching and Filtering the AFUP List* for detailed instructions).

ii. Click the link in the **AFUP ID** column for the Patient Set.

3. If you are entering information received as the result of a specific communication effort:

   i. Select the communication's ID in the **COM-ID** drop-down list. Fields related to that communication will automatically be set in the Follow-up Info section of the page.

   ii. Set the **Status** of the communication to *Success*. The manager of follow-up will use this information to evaluate the effectiveness of the registry's active follow-up procedures.

   iii. **Date Received** will automatically be to today's date. You may override this value if the data arrived at the registry on a previous date. Click the Calendar icon  to modify the date, if necessary.

   iv. You may enter a comment related to the communication, if you wish.

4. Changes that you save on this form will be used to update fields in the Patient Set, as described below. You may update the following fields:

   a. **DOLC** – The Patient Set's current value for date of last contact is shown. You may enter a more recent date. If you enter a date that is earlier than the current value, the Patient Set's field will not be changed.

   b. **VS** – The Patient Set's current value for vital status is shown. If your follow-up information indicates a change in vital status, enter the new value. A change will be made in the Patient Set if the date of last contact is the same or later than the current date in the Patient Set.

   c. **Follow-up Source Central –** To specify the source of the follow-up data, enter the appropriate value in the **FUP Src Cntl** field. You may either enter a code or use the  lookup to select a code.

   d. **Do Not Contact –** If your information indicates a new values for the Do Not Contact field, you may enter it here.

   e. **FU Phys** – If your information indicates a new follow-up physician, you may enter the physician's ID or use the  lookup to select an ID.

   f. **FU Hosp** –If your information indicates a new follow-up hospital, you may enter its facility ID or use the  lookup to select an ID.

5. Click **OK**. Changes to fields on the AFUP form will only be accepted if the date of last contact is the same or later than the current value in the Patient Set.

Update Follow-up Data for a Batch of Patient Sets

Requires system permission: *afup_manager* and (*pat_edit or pat_edit_demographics)*

If you receive a response to a Communication that includes data for multiple patients, you may use the AFUP Manager to open the Communication Response page and enter data for a batch of patient sets. This feature provides a convenient method to update the date of last contact and vital status in a batch data entry mode. It also allows you to indicate whether the communication was successful for each patient or if it failed to yield information for one or more patients. If you wish

to enter additional data for a patient, you may prefer to update a single patient's data on a screen that provides more fields. See the *Update Follow-up Data* section of this chapter for instructions.

To update the follow-up data for a batch of Patient Sets:

1. Select **Manage > Active Follow-up**.
2. Click **Find Comm** to search for the communication.
3. Enter the Communication ID for this set of Patient Sets.
4. Click **Find**. SEER*DMS will list all Patient Sets associated with the communication. The following patient identifiers are shown: Patient Set ID, Social Security Number, and patient name. These are followed by entry fields for date of last contact, vital status, and the communication status (success of failure), and the date that the follow-up data were received.
5. Enter information related to the communication:
   a. **Received Dt** is automatically set to today's date. You may override this value if the data arrived at the registry on a previous date. Click the Calendar icon  to modify the date, if necessary.
   b. Enter a value in the **FUP Src Central** field. You may either enter a code or use the lookup to select a code.
6. If there are 20 or fewer, all Patient Sets will be listed. If there are more than 20, a search box will allow you to search for each Patient Set. You may search by Patient Set ID, Social Security Number, or patient name. Once you enter three or more characters in the search box, the system will begin to display matches. Continue typing until the appropriate Patient Set is displayed. Once the Patient Set is highlighted, you may click or press Enter to add it to the data entry form.
7. Enter data for each Patient Set. Changes that you save on this form will be used to update the Patient Set data fields, as described below. The fields for a patient will be disabled if their AFUP status was set to *Closed* during editing or via automated passive follow-up tasks; they will also be disabled if the status of this communication was modified for the patient. The patients are listed in alphabetical order. Find the correct patient in the list based on patient name, Patient Set ID, Social Security Number. You may update the following fields:
   a. **DOLC** – The Patient Set's current value for date of last contact is shown. You may enter a more recent date. If you enter a date that is earlier than the current value, the Patient Set's field will not be changed. This form will not allow you to enter a less current value for date of last contact.
   b. **VS** – The Patient Set's current value for vital status is shown. If your follow-up information indicates a change in vital status, enter the new value. A change will be made in the Patient Set if the date of last contact is the same or later than the current date in the Patient Set.
   c. **Status** – If this communication successfully yielded information related to this patient, set **Status** to *Success*. This information will be used by a manager to evaluate the effectiveness of follow-up procedures.
   d. **Received Dt** will automatically be to today's date for all patients whose data are updated.

8. Save your changes:

    a. If you would like to continue editing after saving, click the **Save** button at the bottom of the Review Changes page.

    b. If you would like to exit the page, click **Save & Exit**.

Modifying AFUP Status for a Batch of Patient Sets

Requires system permission: *afup_manager*

You may set the AFUP statuses of a batch of patient sets to *closed*. You may want to use this feature to clear the AFUP Manager prior to running the system task to identify patients for the next round of active follow-up. In some registries, the system task's criteria include patients who are not routinely followed by the registry. For example, it may be registry policy that patients who only have non-reportable cancers are not followed on a regular basis. These may be flagged as requiring active follow-up because there are times when they are actively followed. If this is not one of those times, follow the instructions below to select those patients and close their AFUPs.

To set AFUP status to closed for a set of Patient Sets:

1. Select **Manage > Active Follow-up**.
2. No Patient Sets are shown when you first open the AFUP Manager. To use the default filter settings and view all Patient Sets currently flagged as requiring follow-up, click **Apply**.
3. Enter search criteria in the filters to limit the list as needed. Instructions for using the filters are provided in the *Searching or Filtering the AFUP Manager* section of this chapter.
4. Select the Patient Sets:

    a. To select all Patient Sets on all pages of the filtered AFUP Manager, click **Modify All**.

    b. To select a single Patient Set, check the box to the left of the AFUP ID. Click **Modify**.

    c. To select two or more Patient Sets, use one of the following methods:

        i. To select specific Patient Sets, check the box to the left of each AFUP ID. You can only select Patient Sets on the same page with this method.

        ii. To select all Patient Sets displayed on the current page, check the box on the top left of the page, adjacent to the **AFUP ID** column heading. If you would like to exclude a Patient Set, click the checkbox to de-select it.

        iii. Click **Modify**.

5. The number of Patient Sets will be displayed at the top of the page. Select the Action to be applied to these Patient Sets:

    a. If you wish to clear these Patient Sets from the AFUP Manager, select *Close AFUP & Communications*. The Patient Sets' AFUP status flag will be set to *closed* and all unresolved AFUP communications for these Patient Sets will be failed.

    b. If you want to fail all unresolved communications for these Patient Sets, select *Close Communications Only*.

6. Click **OK**.